CLAIMS ONLY

Application Number	Filing Date
10006519	12-3-01

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend			Indep	Depend	Indep	Depend	Indep	Depend
1							51							
2							52							
3							53							
4							54							
5							55							
6							56							
7							57							
8							58							
9							59							
10							60							
11							61							
12							62							
13							63							
14							64							
15	1						65							
16		1					66							
17		1					67							
18							68							
19							69							
20							70							
21							71							
22		1					72							
23		1					73							
24	1						74							
25		1					75							
26		1					76							
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42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	2						Total Indep							
Total Depend	6						Total Depend							
Total Claims	8						Total Claims							